

FIRE DRILL EVALUATION - NON-FIRE AREAS

Activity name	Date	Time	Activity Fire Marshal's (Warden's) name
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R.A.C.E. Procedure: Building 2480 - Defend in place (unless directed to evacuate)

	Yes	No	N/A
1. Was the fire alarm loud enough to be heard by all personnel in the area?			
2. Was an announcement of the fire location made over the public address system?			
3. Could the announcement be heard in your location?			
4. Were the strobe lights flashing?			
5. Did the smoke/fire doors close automatically when the alarm sounded?			
6. Did the staff know what to do?			
7. Were all doors in the immediate area closed?			
8. Were patients in the corridors reassured, given directions, and placed in rooms?			
9. Was equipment cleared from the corridor?			
10. Were all elevators recalled and locked?			
11. Did the staff, if assigned to respond to the fire scene, do so immediately?			
12. Were other members of the staff standing by for further instructions?			
13. Were patients in rooms checked on by the staff?			
14. Did the person in charge of the area provide adequate leadership to his or her staff?			
15. Were staff members prepared to receive evacuated patients and/or staff?			
16. Was a copy of the current fire procedures available in the area?			
17. Did the person in charge conduct a "review" of the fire procedures for his or her staff?			
18. Were the exit signs illuminated?			
19. Number of staff on the unit during the drill: ➔			
20. Number of patients and visitors on the unit during the drill: ➔			

Problems identified:

Corrective action taken:

Signature of activity supervisor or MEDDAC Fire Marshal

Forward the original of this report to the MEDDAC Safety Office
within 24 hours of the fire drill. Maintain a copy in the activity's files.